

PART B - FEE(S) TRANSMITTAL

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7590 03/07/2007

Docket Administrator
 Lucent Technologies Inc.
 Room 3J-219
 101 Crawfords Corner Road
 Holmdel, NJ 07733-3030

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Patty Giebler		(Depositor's name)
<i>Patty Giebler</i>		(Signature)
		5-29-07
		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/620,987	07/16/2003	Angeliki Alexiou	4-2	8825

TITLE OF INVENTION: METHOD AND APPARATUS FOR TRANSMITTING SIGNALS IN A MULTI-ANTENNA MOBILE COMMUNICATIONS SYSTEM THAT COMPENSATES FOR CHANNEL VARIATIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	06/07/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS		06/01/2007 HNGUYEN2 00000043 122325	10620987	
TRAN, KHANH C	2611	375-267000		01 FC:1501 02 FC:1504	1400.00 DA 300.00 DA	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE **LUCENT TECHNOLOGIES INC.** (B) RESIDENCE: (CITY and STATE OR COUNTRY)

MURRAY HILL, NJ 07974

STATE OF DELAWARE

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

- Issue Fee
 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Patty Giebler

Date

5-29-07

Typed or printed name

Patty Giebler

Registration No.

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